

Civil Action No. 4:24-CV-04003

**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 45.)*

I received this subpoena for *(name of individual and title, if any)* DialPad, Inc.  
 on *(date)* 4/29/2025.

☒ I served the subpoena by delivering a copy to the named person as follows: Per Rule 45(b)(1), via  
Certified Mail, Restricted Delivery (see green card), and Rule 4(e)(a) and Pa. R.C.P. 234.2  
on *(date)* 5/2/2025 ; or

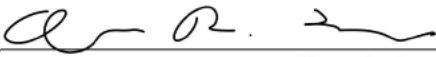
☐ I returned the subpoena unexecuted because: \_\_\_\_\_

Unless the subpoena was issued on behalf of the United States, or one of its officers or agents, I have also  
 tendered to the witness the fees for one day's attendance, and the mileage allowed by law, in the amount of  
 \$ \_\_\_\_\_.

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 6/15/2025

  
*Server's signature*

Andrew Roman Perrong, Esq.

*Printed name and title*

2657 Mount Carmel Avenue, Glenside, PA 19038

*Server's address*

Additional information regarding attempted service, etc.:

Print

Save As...

Add Attachment

Reset

SENDER COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

DialPad, Inc.  
c/o Cogency Global Inc.  
600 North Second Street  
Harrisburg, PA 17101

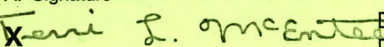


9590 9402 5593 9274 2707 97

2. Article Number (Transfer from service label)

94M 8118 9876 5441 078046

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 ☐ Agent  
☐ Addressee

B. Received by (Printed Name)  
TERRIL MCENTEE

C. Date of Delivery  
5/2/25

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type
- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                               | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input checked="" type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

USPS TRACKING #



HARRISBURG PA 171

2 MAY 2025 PM 2 L

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

United States  
Postal Service

24-4003

• Sender: Please print your name, address, and ZIP+4® in this box•



PERRONG LAW LLC  
2657 MOUNT CARMEL AVE  
GLENSIDE PA 19038-2911